

Policy Statement 2.2.3 – Community Oral Health Promotion: Oral Hygiene

Position Summary

Brushing, cleaning between teeth and seeing the dental professional regularly are essential for good oral health and should be promoted by governments, the dental profession, schools and health organisations.

1. Background

- 1.1. Oral hygiene is one of several key factors in the maintenance of oral and general health.
- 1.2. Daily regular cleaning of the teeth and gums form part of a good oral hygiene routine.
- 1.3. The daily oral hygiene routine is a key contribution that individuals can make to reduce the prevalence and severity of oral diseases and is a basic health requirement at all ages independent of the presence of teeth.
- 1.4. Poor oral health is associated with various systemic diseases.
- 1.5. Early childhood decay is the single most common chronic childhood disease which can be largely prevented by good oral hygiene.
- 1.6. Frail and care-dependent people may require the aid of another person to maintain their oral hygiene. This may include a health professional, carer or family members.
- 1.7. The main oral hygiene strategies include:
 - brushing for two minutes twice a day;
 - use a fluoride toothpaste;
 - floss at least once a day; and
 - visit a dental professional for regular check-ups and professional cleaning.
- 1.8. Tooth decay (dental caries) and gum disease (periodontal disease) are two of the most common diseases experienced by Australians. Plaque is the primary cause of both diseases. Oral hygiene strategies can reduce plaque levels and deliver effective preventative agents to the sites of potential or established disease.
- 1.9. The following products are proven aids to oral hygiene:
 - toothbrush or denture brush;
 - electric toothbrush;
 - toothpaste;
 - dental floss or other inter-dental aids;
 - sugar-free chewing gum;
 - mouthrinse
- 1.10. The promotion of oral hygiene is required to maintain community awareness of oral health care needs

Definitions

- 1.11. BOARD is the Dental Board of Australia.
- 1.12. DENTAL PRACTITIONER is a person registered by the Board to provide dental care.
- 1.13. NON-DENTAL PRACTITIONERS are health care providers other than those who are registered by the Board.
- 1.14. ORAL HYGIENE is the maintenance of oral cleanliness for the preservation of health.
- 1.15. SCREENING is the intentional observation of patients to recognise potential deviations from normal health.

2. Position

- 2.1. Public education campaigns should promote good oral hygiene practice.
- 2.2. Oral hygiene should be embedded into educational curricula at all levels.
- 2.3. Oral hygiene should be promoted in health awareness campaigns supported by Governments, health funds, industry and health professions.
- 2.4. Oral health education and oral hygiene should be included in antenatal care and education for parents.
- 2.5. Parents and carers should understand the importance of oral hygiene measures to assist in the development of children's oral cleaning skills from a young age.
- 2.6. Education and training courses for some non-dental practitioners should include an oral health component enabling them to understand the importance of oral health. Where appropriate, additional education and training in oral health promotion and dental screening should be provided.
- 2.7. Tertiary education courses for carers and health care providers must include a mandatory oral health component.
- 2.8. Training in oral health care for carers and health care providers must be provided by appropriately trained health professionals.
- 2.9. Dentists, or delegated and suitably trained personnel, must have a role in identifying and maintaining suitable practices and recommending oral hygiene measures to suit individual needs and capability.

This Policy Statement is linked to other Policy Statements:

- 2.1 National Oral Health
- 2.3.1 Special groups: Children
- 2.3.2 Special groups: Adolescents and Young Adults
- 2.3.3 Special groups: Aged Persons
- 2.3.5 Special groups: Aboriginal and Torres Strait Islander Australians
- 2.3.6 Special groups: Individuals with Disabilities
- 2.3.8 Special groups: Infants & Pre-School Children
- 2.5.1 Funding: Government
- 3.14 The Role of Non-Dental Practitioners in Oral Health
- 6.19 Minimal Intervention Dentistry

Policy Statement 2.2.3

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Editorially amended by Constitution & Policy Committee, October 5/6, 2017.

Amended by ADA Federal Council, April 11/12, 2019

Amended by ADA Federal Council, March 24, 2022

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- [2.1 National Oral Health](#)
- [2.3.1 Special groups: Children](#)
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- [2.3.3 Special groups: Aged Persons](#)
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